

Permit #: 20148

Date Issued: 2-2-96

County: Bates

Date Cancelled: _____

CONFIDENTIAL UNTIL: _____

Date Plugged: 2-12-96

COMMENTS:

OCC FORMS	Date Received
1	
2	
3	
3i	2-2-96
4	
4i	
5	
6	
7	
8	4-5-94
11	
12	
Misc. Form 2	

	TYPE	ID #	Date Received
Logs			
Samples			
	chip		
	core		
Analyses			
	water		
	core		
Additional Submitted Data:			

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

APPLICATION TO DRILL ☐ DEEPEN ☐ PLUG BACK ☐for an oil well ☐ or gas well ☐ Hydrocarbon Test ☒NAME OF COMPANY OR OPERATOR _____ Town Oil Co. DATE 1-30-96

16205 W. 287 St.

Paola

Kansas 66071

Address

City

State

DESCRIPTION OF WELL AND LEASE

Name of lease Ferguson	Well number 1	Elevation (ground)
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WELL LOCATION (give footage from section lines)
1450 ft. from (N) (S) sec. line 850 ft. from (E) (W) sec. line

WELL LOCATION
 Section 10 Township 38N Range 32W County Bates

Nearest distance from proposed location to property or lease line: N/A feet
 Distance from proposed location to nearest drilling, completed or applied for well on the same lease: N/A feet

Proposed depth. 75	Drilling contractor, name & address Town Oil Co.	Rotary or Cable Tools Rotary	Approx. date work will start 1-30-96
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Number of acres in lease. 120	Number of wells on lease, including this well, completed in or drilling to this reservoir: <u>0</u> Number of abandoned wells on lease: <u>0</u>
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If lease, purchased with one or more wells drilled, from whom purchased: Name N/A No. of Wells: producing 0
 Address _____ injection 0
 _____ inactive 0
 _____ abandoned 0

Status of Bond
 Single Well ☐ Amt. _____ Blanket Bond ☒ Amt. \$60,000 ☒ ON FILE ☐ ATTACHED

Remarks: (If this is an application to deepen or plug back, briefly describe work to be done, giving present producing zone and expected new producing zone) use back of form if needed.
N/A

Proposed casing program: <u>N/A</u>				Approved casing -- To be filled in by State Geologist <u>N/A</u>			
amt.	size	wt./ft.	cem.	amt.	size	wt./ft.	cem.

I, the undersigned, state that I am the _____ of the _____ (company), and that I am authorized by said company to make this report, and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

Signature Lulu TownPermit Number 20148☒ Drillers log required☒ Drill stem test info. required if runApproval Date 02/2/96☒ E-logs required if run☐ Samples requiredApproved By James H. Bell Hwb☒ Core analysis required if run☐ Samples not required

Note: This Permit not transferable to any other person or to any other location.

WATER SAMPLES REQUIRED ☒Remit two copies to: Missouri Oil and Gas Council
P.O. Box 250 Rolla, Mo. 65401

One will be returned for driller's signature

Approval of this permit by the Oil and Gas Council does not constitute endorsement of the geologic merits of the proposed well nor endorsement of the qualifications of the permittee.

3/12/92



MISSOURI DEPARTMENT OF NATURAL RESOURCES
MISSOURI OIL AND GAS COUNCIL
PLUGGING RECORD

FORM OGC-7

OWNER Town Oil Co.		ADDRESS 16205 W. 287 St. Paola, KS. 66071	
NAME OF LEASE Ferguson		WELL NUMBER 1	PERMIT NUMBER (OGC-1 OR OGC-3 NUMBER) 20148
LOCATION OF WELL 1450' FNL 850' FWL		SEC-TWP-RNG OR BLOCK & SURVEY 10-38N-32W	COUNTY Bates
APPLICATION TO DRILL THIS WELL WAS FILED IN NAME OF Town Oil Co.		HAS THIS WELL EVER PRODUCED OIL OR GAS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CHARACTER OF WELL AT COMPLETION (INITIAL PRODUCTION) OIL (BBLS/DAY) N/A GAS (MCF/DAY)
DATE ABANDONED 2-12-96	TOTAL DEPTH 64	AMOUNT WELL PRODUCING PRIOR TO ABANDONMENT OIL (BBLS/DAY) GAS (MCF/DAY) N/A	WATER (BBLS/DAY)
Name of each formation containing oil or gas. Indicate which formation open to well bore at time of abandonment. N/A		Fluid content of each formation	Depth interval of each formation
			Size, kind, & depth of plugs used, giving amount cement.
			2 sacks cement
SIZE PIPE N/A	PUT IN WELL (FT)	PULLED OUT (FT)	LEFT IN WELL (FT)
		GIVE DEPTH AND METHOD OF PARTING CASING (SHOT, RIPPED, ETC.)	
		PACKERS AND SHOES	
WAS WELL FILLED WITH MUD-LADEN FLUID?		INDICATE DEEPEST FORMATION CONTAINING FRESH WATER	
NAME AND ADDRESSES OF ADJACENT LEASE OPERATORS OR OWNERS OF THE SURFACE			
NAME		ADDRESS	
N/A			
METHOD OF DISPOSAL OF MUD PIT CONTENTS N/A		DIRECTION FROM THIS WELL RECEIVED APR 05 1996 MO Oil & Gas Council	
NOTE FILE THIS FORM IN DUPLICATE WITH (USE REVERSE SIDE FOR ADDITIONAL DETAIL)			
CERTIFICATE I, the undersigned, state that I am the <u>Partner</u> of the <u>Town Oil Co.</u> (Company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct, and complete to the best of my knowledge.			
SIGNATURE <i>Ruth Town</i>		DATE 4-3-96	

DETAIL OF FORMATIONS PENETRATED

FORMATION	TOP	BOTTOM	DESCRIPTION (SEE * BELOW)
Soil & clay	0	6	
Lime	6	7	
Clay	7	13	
Lime	13	14	
Dk. shale	14	14.5	
Lime	14.5	18	
Slate	18	21	
Lime	21	22	
Sandy shale	22	25	
Lime	25	26	
Sandy shale	26	28	
Sandy lime	28	32	
Lime shells	32	38	
Shale	38	53	
Slate	53	56	
Shale	56	60	
Lime	60	64	

NOTE ►

* Show all important zones of porosity, detail of all cores, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

INSTRUCTIONS ►

Attach drillers log or other acceptable log of well if available.

This Well Completion or Recompletion report and well log shall be filed with the Missouri State Geologist not later than 30 days after project completion.